

# MDT SWPPP INSPECTION REPORT

Date: \_\_\_\_\_  
 Project Number: \_\_\_\_\_  
 Project Name: \_\_\_\_\_  
 Uniform Number: \_\_\_\_\_

INSPECTION TYPE:	
____ 14 DAY- FROM _____ TO _____	
____ 0.5 INCH OR GREATOR STORM EVENT	
EVENT DATE _____	
____ MONTHLY	
____ OTHER _____	

Check Y (yes), N (no), or N/A (not applicable)

NO.	DESCRIPTION	Y	*N	N/A
1	Are Erosion Control devices in-place and functioning in accordance with the Erosion Control Plan?			
2	Are sediment traps, barriers, and basins in-place, clean and functioning properly?			
3	Are sediment controls in-place at required perimeter locations?			
4	Are all discharge points free of any noticeable pollutant discharge (This includes sediment)?			
5	Are applicable culvert inlets and outlets properly protected?			
6	Are water resource areas properly protected?			
7	Are soil slopes steeper than 3H:1V receiving Erosion Seeding?			
8	Are soil slopes steeper than 3H:1V undergoing slope roughening?			
9	Are waterway protection measures in place and functioning properly at all applicable stream crossing locations?			
10	Are areas outside the construction footprint undergoing disturbance? <b>If yes explain.</b>			
11	Has the Erosion Control Plan been revised to address field conditions?			
12	Is construction sequenced and conducted in a manner to minimize erosion and/or sedimentation?			
13	Are clearing and grubbing operations minimized to the smallest practicable area?			
14	Are grading operations beginning within 72 hours in areas of topsoil removal or pioneering?			
15	Are culvert installations beginning within 72 hours of clearing, grubbing, or grading the installation area?			
16	Are material storage areas an appropriate distance from surface water areas and adequately protected?			
17	Are tracking control measures utilized at points of ingress/egress to public/private roads?			
18	Are dust control measures being appropriately implemented?			

\* If "no" checked comment on back of form. Add additional comment sheets, documentation , maps, photos, etc. as necessary.

## MDT Representative

## Contractor Representative

Inspected by: \_\_\_\_\_  
 (print name)

Inspected by: \_\_\_\_\_  
 (print name)

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

# MDT SWPPP INSPECTION REPORT

**Project:**\_\_\_\_\_

Date: \_\_\_\_\_

[illegible]